# Magellan Health Services of Louisiana Partnering for a successful Coordinated System of Care

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### Mission/Vision

**Magellan Health Services** is a leading, diversified specialty health care management organization.

**Mission:** With a focus on care and respect, we apply clinical expertise to assist people during challenging times. We deliver innovative solutions to our customers and collaborate with providers to positively influence the health and well being of individuals and the affordability of care.

**Vision:** We are the premier partner in making quality healthcare more affordable, and innovating to bring clinical excellence into the lives of the people entrusted to our care.

# Our Principles

At Magellan, we support a philosophy of wellness that focuses on personal strengths, building hope and offering choices.

#### Resiliency

We believe that all people have qualities that enable us to rebound from adversity, trauma, tragedy, or other stresses and to go on with life with a sense of mastery, competency and hope.

#### Recovery

We believe that all people living with behavioral health conditions have the capacity to learn, grow and change, and can achieve a life filled with meaning and purpose.

### **Cultural Competency**

We work to provide care and services that recognize the diverse backgrounds of the individuals and families we serve. Our strategies acknowledge and respect the behavior, ideas, attitudes, values, beliefs and language of all individuals.

# Focus on Clinical Innovation for Improved Outcomes and Results

# Reliance on Partnership

Magellan collaborates with governments, providers, national advocacy organizations, individuals and their families to design, manage and continually improve behavioral health systems for government agencies.

#### Our partners include:

- Service Providers to gain their unique perspective on public sector consumers' behavioral health needs and resources available to meet those needs.
- State and County Government Agencies as they build, manage or transform their public mental health and substance abuse systems.
- Individuals and Families who play a variety of critical roles including participating on our Program Advisory Boards and Quality Improvement committees.
- National and Local advocacy organizations which support and promote behavioral health and wellness for everyone.

### Public Sector Innovations

### Recovery and Resiliency Initiatives

- Self-Directed Care (first program of its kind in the U.S.)
- Peer Support Whole Health
- MY LIFE Youth Empowerment Initiative
- MY Fest community festival raising awareness and reducing stigma
- Homeless/Housing and Vocational Support Programs

### Children, Youth and Families

- Family Driven, Youth Guided Team-Based Planning
  - Parent Support Partners
  - Wraparound and Child and Family Teams
  - System of Care
- Home & Community Services for Youth who are At-Risk
- Transition to Independence Process Model
- Children's Champion Initiatives
  - New approaches to residential care
  - Eliminating overuse of psychotropic medications for children & youth

# Public Sector Innovations (Continued)

#### Wellness Initiatives

- Smoking Cessation
- Health & Wellness Assessments
- Peer Support Whole Health

### Cultural Competency

- Core Elements Embedded throughout our Tools & Management Processes
- Culturally Competent Programs for Older Adults
- Organizational Self-Assessments and Trainings
- Cultural Competency Plans at Every Service Center

# Public Sector Innovations (Continued)

### Clinical Programs

- Pre-Risk Predictive Modeling
- Primary Care Physician Consult Line
- Medical/Behavioral Integration Programs (e.g., Pennsylvania HealthChoices) HealthConnections, and Iowa/Maricopa Integrated Health Home)

### Web-Based Programs and Services

- Free National Webinars on Recovery and Resiliency-related topics
- Free Resiliency & Recovery E-Learning Center at www.MagellanHealth.com/Training

## **Evolving Service Delivery System to Improve Outcomes**

Residential Whitepaper as the foundation for change outlines the following concepts:

- Community-based programming needs to be comprehensive and expansive
- Involvement of family and youth in treatment planning and implementation
- Service approach that is individualized that incorporates treatment interventions built on strengths to address needs
- Residential treatment is evolved to be a short-term targeted treatment intervention

# One example of a new approach

#### One application: Intensive Residential Treatment Program

- Magellan, in collaboration with Lehigh and Northampton counties in Pennsylvania, worked with local providers to pioneer community-based alternatives to traditional residential treatment for children and adolescents with serious emotional disturbance.
- The Intensive RTF model represents a fundamental change in how residential treatment is provided and emphasizes community services and supports essential to the success of children and their families.
- Intensive RTF programs feature an accelerated timeframe over traditional residential standards, with length of stay ranging from 60-120 days. Other key components include:
  - *An intensive team approach*. The team includes a licensed therapist, an intensive case manager, and the child and involved family members.
  - Family involvement. Families participate in treatment planning meetings, family support groups and family therapy that includes sessions within their home as well as the RTF
  - Comprehensive discharge planning. Planning begins upon admission and focuses on building community-based supports and ongoing, community-based treatment.

## Results from PA example

#### **Outcomes**

Comparing Intensive RTF with Traditional RTF

### Average Length of Stay

- 45 youth were discharged from Intensive RTF within the first 24 months of the pilot. The average length of stay in Intensive RTF for the first 24 months was 92 days.
- Following 24 months of data collection, a comparison of the intensive program with "traditional" RTF shows that the ALOS for Intensive RTF was 151 days shorter than for traditional RTF during that same 24 month period.

#### **Readmission Rates**

No residential treatment facility readmissions occurred following treatment in the first 24 months of Intensive RTF – compared with an average of 4 readmissions for traditional RTF programs during that same 24 month period.

# Magellan Health Services of Louisiana

## Our Approach in Louisiana

- Magellan will partner with DHH/OBH to realize the vision outlined in the RFP by:
  - Taking a multi-year, transformational manner to system development
  - Utilizing a regional approach to build upon existing strengths
  - Bringing complementary infrastructure, tools and innovation to advance the foundational system
  - Partnering with existing governing and advisory bodies to realize the vision, mission and objectives laid out in the plans currently developed

# Our Approach in Louisiana

- Magellan will collaborate with service recipients, family members, providers and other system stakeholders to:
  - Ensure timely access to care
  - Decrease reliance on inpatient care while expanding community based evidence base practices
  - Continue advancement of the Children's Coordinated System of Care
  - Integrate mental health and substance abuse services
  - Advance recovery and resiliency goals while addressing cultural preferences of members
  - Assist in the transitioning of services to the LGEs

# **Key SMO Program Themes**

- ➤ Optimization of resources
- Access to quality services
- ➤ Reducing Regional and Provider Disparities
- ➤ Building on Youth, Family Member and Adult Consumer Strengths
- Collaborating with Governance and Management Infrastructure at State and Regional Levels
- ➤ Integrating Accountability, Data Reporting, and Outcome **Systems**
- ➤ Developing a State-based Training and Technical Assistance Infrastructure
- ➤ Sustainability

# Magellan Partnering for CSoC

### Overview

- Regular Collaborative Meetings for Shared Development & Decision Making
- Stakeholder collaborative protocols to outline expectations, roles and responsibilities(DCFS, DOE, OJJ)
- Children's System Development (critical to successful transition from CSoC)
- •In partnership with CSoC State Team, Statewide Coordinating Council, FSOs and others develop statewide family and youth involvement plans
- Hold regionally based meetings with key partners and necessary audiences to establish working relationships and processes
- •In partnership with the CSoC Director and state agencies, establish an out of home provider consortium focused on realizing Building Bridges principles

### Collaboration with Statewide Coordinating Council

- Utilize the SCC to support family, youth and stakeholder involvement
- Honor the current CSoC Structure including the Governance Board and the development of the Statewide Coordinating Council
- Our goal is to:
  - Support the Council as appropriate
  - Provide general and detailed information related to SMO program
  - Provide technical support as requested
  - Avoid duplication of efforts

# Approaches

- Subject matter field expertise to complement Louisiana's Coordinated System of Care vision & operating framework
  - ○Statewide model
  - oFoundations for serving children, youth & families
- Principles of CSoC demonstrated through Wraparound best practice
  - Processes for treatment planning and oversight of quality align with wraparound best practices
- Flexible staffing model

# Magellan Approaches to Capacity Building, Family Involvement and Quality

# Capacity Building

All capacity building will be delivered in collaboration with the CSoC State Team and contractors

### Wraparound Agencies (WAA) and Family Support Organizations (FSO) **Phase I - Development**

- Strengths and Needs Assessment of current and future WAA and FSO to guide organizational strategic planning
- Statewide Practice Protocols outlining system expectations and best practice guidelines – National Wraparound Initiative
- Stakeholder Collaborative Protocols outlining roles and responsibilities of the WAA and FSO in relation to stakeholder agencies (DOE, OJJ, DCFS)
- Technical Assistance (TA) and support for hiring and orientation processes
- Basic and advanced training on System of Care principles and Wraparound

# Capacity Building (continued)

### Wraparound Agencies (WAA) and Family Support Organizations (FSO)

### Phase II – Implementation in partnership with state infrastructure and contractors:

- Targeted trainings: Youth and Family Engagement, CANS, Team Composition and Inclusion of Natural Supports, Strengths and Culture Discovery, Needs vs. Services, Functional Strengths, and Transition Planning
- Training, TA, and mentoring to family-run organizations and FSO to implement strategies for strengthening families: distance learning, support in rural areas
- Preparation of residential treatment facilities to partner with WAA and FSO
- SMO to take on the role of WAA and/or FSO in regions where not yet operational
- Establish mechanisms to support expansion of family engagement and meaningful involvement statewide

# Capacity Building (continued)

### Wraparound Agencies (WAA) and Family Support Organizations (FSO)

### Phase III – System Management, Oversight, and Improvement in partnership with the state and contractors

- Ongoing Community Forums/ Town Halls across the state to educate, inform, and obtain feedback on system functionality
- Focus groups/ surveys with stakeholders to gauge system functionality and need for additional capacity, service types
- Provide support for the approval and monitoring of annual regional work plans to ensure alignment with CSoC and Wraparound principles

# Family Engagement & Meaningful Involvement

In partnership with the state and the SCC, develop statewide family involvement plan that includes:

- Outreach Strategies for Engaging Families, FSO's, Family Partners, and Family-Run Organizations
- Expand leadership development
- Create practice guidelines for family involvement
- Share national models for application

Partner with family-run organizations and FSOs to advance system strengths to:

- Provide training, technical assistance and mentoring
- Provide distance learning and support (key to rural areas and family life constraints)

# Family Engagement & Meaningful Involvement (continued)

### In partnership with the SCC:

- Strengthen the individual and collective capacity statewide of family run organizations and individuals to support familydriven care
- Support the targeted expansion of family engagement and meaningful involvement beyond elements of care to system transformation efforts
- Offer access to national certification for family support and other resources as a means to further strengthen family support capacity

# Quality Assurance & Improvement

In partnership with the State Governance Board's Quality **Assurance Committee:** 

- Statewide orientation and training: System of Care Principles, Wraparound, Best Practices, System **Expectations**
- Practice Protocols as guidelines and reference tools for Best Practice and system expectations
- Wraparound Fidelity Assessment System
- Technical Assistance (TA) at all levels: system, organization, team
- Outcomes Dashboards

# Quality Assurance & Improvement (continued)

Work in partnership with the Statewide Governance Board to achieve:

- System of Care practice reviews, quality monitoring audits to assess fidelity to best practices: documentation review, staff interviews, youth and caregiver interviews
- Annual regional Quality Management/ Utilization Management work plans
- Performance Improvement Plans and Interim Monitoring
- Tracking of performance and outcome trends to guide planning

Discussion, questions and next steps